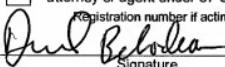


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|---|----------------------------------|---|
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818.)</i> | | Docket Number (Optional) 0465-1032P |
| Application Number | 10/670,274-Conf. #4902 | Filed September 26, 2003 |
| For WRITE-ONCE OPTICAL RECORDING MEDIUM AND DEFECT MANAGEMENT INFORMATION MANAGEMENT METHOD THEREOF. | | |
| Art Unit | 2627 | Examiner L. Bibbins |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | |
| <input checked="" type="checkbox"/> | One month (37 CFR 1.17(a)(1)) | Fee \$130 Small Entity Fee \$65 \$ 130.00 |
| <input type="checkbox"/> | Two months (37 CFR 1.17(a)(2)) | Fee \$490 Small Entity Fee \$245 \$ _____ |
| <input type="checkbox"/> | Three months (37 CFR 1.17(a)(3)) | Fee \$1110 Small Entity Fee \$555 \$ _____ |
| <input type="checkbox"/> | Four months (37 CFR 1.17(a)(4)) | Fee \$1730 Small Entity Fee \$865 \$ _____ |
| <input type="checkbox"/> | Five months (37 CFR 1.17(a)(5)) | Fee \$2350 Small Entity Fee \$1175 \$ _____ |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-2448</u> . WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | |
| I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>42,325</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____ | | |
|  <u>Signature</u> David A. Bilodeau Typed or printed name | | <u>June 16, 2009</u> <u>Date</u> <u>(703) 205-8000</u> <u>Telephone Number</u> |
| <small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small> | | |
| <input type="checkbox"/> Total of <u>1</u> forms are submitted. | | |